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Dibugue County Friends	C Flybrain		Corner. #	
IMPORTANT: Initioute by # type of committee you are rec	orting for:	-		
(1) Statewide/Legislative/Judge Standing for Recoggion Co.	Added / 7 White DAC ( 3 )State Deep	1 3	Logged in	
(4) County Central Committee (5) County Cardidate (6) Publical Subdivision Condidate (8) County PAC (9) City	City Candidate (7 )School Board or Other PSC (18) Writered Board or Other Schiller		Scanned	B
Subdistation PAC (11) Local Bullet Issue			Computer	23
CANDIDATE COMMETTIBES GICLY:			Andhod	
Condidate Name	Political Party (if applicable):	1 1	File with:	
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Office Sought	District (If Sanate or House).		Disclosure Court 510 E. 12 <sup>th</sup> , Ste.	=
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Late reports are subject to possible chill and criminal panel	Han Duranted to James Contraction Atlan		Fax: 515-281-37	D1
the candidate, for a candidate's committee, and the chairp	erson, for any other two of comulties, is	move,		1A n 50319
individual responsible for filing timely and glocurate reports	•			
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For Instructions, See Back of Form	Set Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A (Rev. 07/03)	MONETARY RECEIPTS
DUDUA 10 Co. Friends of Extension			CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Shorry Glenn			T
AA AI DE	CK#	2659 82nd St		\$	
08-06-210	5656	Urbandale IA 50322		50.0º	
	10#	Allen Ricks PO Box 258			
08-12-310.	CK#				
001X-40	CK# 339.1 ID#	Audson IA 50643		800°5	
	}	mary Sue Green			
80 03 04b	CK# 2233			0.0 *=	<b> </b>
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	224	James Theisen 2606 Hacienda	•		
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20-20-200	1D#			2260	
	CK#	Dub Co. Farm Bureau 2373 St Kennedy			
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39-15-2010	12546	Dubigie 519 52001		150	<del></del>
	ID#	Peterslaung Feed			
٠	CK#	1650 300th Ave		50	· L
09-24-2010	19882 10#	Dyersville IA 52040		<b>!\$</b>	
	102	Klosermann 1874h Steet	ļ		
na orana	CK#	Earlville In 52041			L
09-24-2010	39993			100	
		Kirchoff 16792 thurderridge			
9-23-240	CK#	Poste 1/4 52063		100 -	
1-0.0-10	10#	mozena		1000 =	
	CK#	2512 Pennsylvania			
9-27-200	5565	Dublique SA 52001		200 🐣	1
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		TAT!		\$5750	
		TOTAL (if last pag	ge of this schedule)	s	

"Disclosure two requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consunguinity (blood relatives) and affinity (relatives by marriage). If surmarne of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

SCHEDULE

For	Instructions.	200	Rack	A E	
		200		OI PI	

CONTRIBUTIONS MONEY TAKEN (N (Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS	
COMMITTEE NAME (Must be same as on Statement of Organization)  Dubugui County Friends of Extension		CK THIS BOX IF NOING FORM	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) ANID PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
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<b>08-4-2010</b>	CK#	1		3474	<u> </u>
	ID#	Trish Driscoll			
	CK#	2301 Driscoll Rd			11
08-31-2010	1D#	Bernard IA 52033		40	<b></b>
	10# 	Km Sneck 11558 Robin Hood		<u> </u>	<del> </del>
	CK#	1		į	<b>                                     </b>
2010	3274	Dubugue Str 52001		100	<del></del>
	10#	Tom kane			
VG 60 2	CK#	14858 Westerdar St. 8			
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19-17-201	CK#	Independence \$4 50644			
09-07-200	1D#			<i>5</i> 00	
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	CK#				
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	ID#	Gerald Miller		15	
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ĺ	IU#	Eldan Kuric			
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\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

2 of (for Schedule A)

For Instructions, See Back of Form	_		
The same and the s	Seeset Form	SCHEDULE	1
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)  Dubuque Co Frends of Extension			CK THIS BOX IF NOING FORM
DUDGILLE OF FIRMS OF EXPENSION	1		

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"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguintly (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 4

For Instructions, See Back of Form	Set Form	SCHEDULE		
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS	
COMMITTEE NAME (Must be same as on Statement of Organization)  Duby and County Friends of Evilence			CK THIS BOX IF NOING FORM	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (# applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
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"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 4 (for Schedule A)

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form	SCHEDULE	
COUNT	(Rev. 07/03)	MONETARY EXPENDITURES
ISLATIVE WN AND THE OM THE YOWA		CK THIS BOX IF

## **EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: MOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES; LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE YOWAETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) CANDIDATE NAME AND ADDRESS TO WHOM AMOUNT **PURPOSE** DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION) EXPENDED EXPENDED (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# to Box 66 Dubugue IA CK# 1900 Golden View 032 ID# 50 ° 033 12 Besiet ser ce Dubigar ID# 840 UC tostraskir <u> 1034</u> uspostal service again <del>5</del>2633 CK# Us Postmader 100 19/20/10 035 ID# POBOx661 DubugueIX CK# SOUCH 340 °5 031 09/20/10 Golden Vicu ID# 4242 Rack courds a Business Chevelle CK# Dubyce AZ M. Of 122/10 12 626. ID# Dupmenosto Ago saraboga CK# 09/27/10 c c idyo mmi 1931 20th Avest Dyersville DA 52040 ID# CK# 091271**0**0 1000 == 1041 SUB-TOTAL \$8466.12 TOTAL (if last page of this schedule) 84666

		CANDIDATES'		

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 67/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMETTE	E NAME (Must be	same as on Statement of Organization)			
11 \		nty Friends of Exte	inson		
DATE EXPENDED (MIM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Distursement) WAS MADE	PURPOSE (DESCRIBE TRANSAC	CTION)	AMOUNT EXPENDED
iol <b>a</b> zlio	10# CK# 1042	The Barn 5090 Sharrill Rd Sherrill, IX 52013	The Staks for		S
10/01/10	CK#	Brodie IA	the Fundraiser		18000
ioloilie	OHU	Radio Dulougio soci il go Elmst. Dubugue IN Lamar Co.	Radio Adveri	7	1275°
10/05/10	ID# CK# 1045	CLS Services 1311250wth Park Appleton WI 54914	Yard signs	CATE	108500
10/05/10	1046	Dubuque Advertisers 2966 BY Kennedy Ri Dubugue SA Sanos	Ad in paper		444 *
ازماه (ت	1047 CK#	Tim Pahamata 10462 Stroseph Dibuque Str 5003	Postage for pos	1	234°
	ID# CK#				229
	ID# CK#				
				UB-TOTAL	\$9619
			TOTAL (If last page of this	scredula)	\$ 18145.12

THIS BOX APPLIES TO CANDIDATES	COMMITTEES ONLY
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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowe Code 68A-402(3)(i).)

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Page	2	of	2	

18145.12

COMMITTEE NAME (Must be same as on Statement of Organization)  District Co. Friends of Extension  NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.			(Rev. 08/98) INCURRED INCURRED INDEBTEDRES  CHECK THIS BOX IF AMENDING FORM	
DATE	LUGATIONS REMAINING THIS REPORTING PERI NCLUDE LOANS SHOW LOANS ON SCHEDULE	EF) re	n "incurred debt" is a debt for nods or services ordered or ceived, but not paid for by the td of the reporting period., gardless of whether an invoice is been received.	
INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OF SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*	
19/30/10	CarlideRyan 4242 Chavenelle Rd Dubique IA 52002	4×9 Rack Cards	264.89	
<u>19122110</u>	Carliste Ryan 4242 Chowerelle Kel Dubugue IA 52002	14x6 Postavdo	604.36	
10-14-10	The Golden View PoBox 661 Dubuque \$452004-0661	Adin Papper	120.00	
SUB-TOTAL \$  FOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD \$				
"11 actual figure Is u	nknown, show "estimated" beside the figure.	P	989.25 age or (for Schedule D)	

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CANDIDATE COMMITTEES NOTE:

Oct 15 10 11:24a

FUR INSTRUCTIONS, SEE BACK OF FURM

DUBUQUE COUNTY EXTENSION

Combitable Committee Note:

'incurred indebtedness also includes each personventity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule Githe nature of performance and the estimated performance reasonably expected of the consultant.